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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 186.1004.01 | | |
| Application Number 09/632,897 | Filed 8/7/2000 | | | |
| For Method and System for Managing and Delivering Web Content to Internet Appliances | | | | |
| Art Unit 2457 | Examiner Burgess, B. | | | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | |
| <input type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | Fee \$ 120.00 | Small Entity Fee \$ 60.00 | \$ _____ |
| <input checked="" type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$ 450.00 | \$ 245.00 | \$ <u>245.00</u> |
| <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$ 1,020.00 | \$ 510.00 | \$ _____ |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$ 1,590.00 | \$ 795.00 | \$ _____ |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$ 2,160.00 | \$ 1,080.00 | \$ _____ |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached (2 copies). | | | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0365</u> . I have enclosed a duplicate copy of this sheet. | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | |
| I am the | <input type="checkbox"/> | applicant/inventor. | | |
| | <input type="checkbox"/> | assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | |
| | <input checked="" type="checkbox"/> | attorney or agent of record. Registration Number <u>33,040</u> | | |
| | <input type="checkbox"/> | attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____. | | |
| <u>/Steven A. Swernofsky/</u> | | <u>April 27, 2009</u> | | |
| Signature | | Date | | |
| <u>Steven A. Swernofsky</u> | | <u>650-947-0700</u> | | |
| Typed or printed name | | Telephone Number | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | |
| <input type="checkbox"/> Total of _____ forms are submitted. | | | | |

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.